

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	D NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	11-30-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>CF</i>	62503 <i>6/27/01</i>	1-23-01 <i>3-20-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 : ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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